2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N05000007684

Entity Name: OAKS OF GAINESVILLE CONDOMINIUM ASSN., INC.

Current Principal Place of Business:

6615 W. NEWBERRY RD
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 20-3349698 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAUSAMAN, D JEFFREY
C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

ACTION REAL ESTATE SERVICES
6110-B N.W. 1ST PL.
GAINESVILLE, FL 32607 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: D JEFFREY SAUSAMAN 04/29/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PLA, JOHN M
Address: 4907 NW 43RD STREET SUITE F
City-St-Zip: GAINESVILLE, FL 32606

Title: SD ( ) Delete
Name: PUGH, MERRILL
Address: 100 SW 75TH STREET SUITE 205
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: WALKER, MARK
Address: 12026 NW 1ST LANE
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SINGLETON, SABRINA
Address: 6519 W. NEWBERRY RD #B7
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN PLA P 04/29/2009
Electronic Signature of Signing Officer or Director — Date